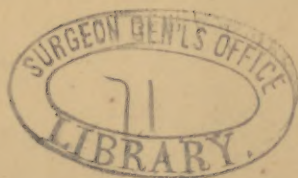


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ON

INSANITY IN ITALY.



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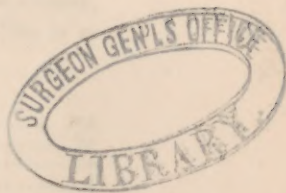
INSANITY IN ITALY,

BY

✓
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[REPRINTED FROM THE "JOURNAL OF INSANITY."]



UTICA:

PRINTED AT THE NEW YORK STATE LUNATIC ASYLUM.

1854.

INSANITY IN ITALY.

A knowledge of the Italian works on mental derangement being by no means generally diffused, we are led, in the following effort, to discuss some of these productions, and also to make such extracts as appear to be of interest. We commence with two statistical works, the first of which is entitled, "*Ospizio Di S. Benedetto In Pesaro; Statistica Sul Movimento Degli Alienati Dall' Anno Della Sua Fondazione, 1829. A Tutto Giugno Dell' Anno Couente, 1852. Del Dottore Giuseppe Girolami, Medico Direttore;*" being the statistics of the Hospital of St. Benedict, at Pesaro,* from the year of its foundation, 1829, to the middle of the year 1852. Published by Dr. Giuseppe Girolami, the Medical Director of the Institution.

This publication is dedicated to His Excellency, the most Reverend Monsignor Pasquale Badia, Delegate of Urbino and Pesaro. And from some preliminary remarks, it seems that the industrious author has not long succeeded to a post previously occupied by the distinguished Prof. Meli. In the extensive statistical tables which he lays before the medical world of Italy, he certainly has made good use of his time. These are indeed full and elaborate, and constitute an interesting addition to the statements and works of an analogous character. As is usual in general articles of the kind, he commences with three tabular views, giving the number of receptions, discharges and deaths; and in a fourth, he presents a summary of the three preceding tables. This is as follows:—

ADMISSIONS.		DISCHARGES.	
Mania,	553	Cured,	484
Lypemania,	76	Taken out by friends,	49
Monomania,	177	Insanity not verified,	24
Dementia,	116	Eloped,	5
Imbecility,	8	Died,	255
Idiocy,	27	Remain, July 1st, 1852,	165
Doubtful,	20		
<hr/>		<hr/>	
Total,	982	Total,	982

* Pesaro (the ancient Pisaurum) is a town in the Papal States, near the mouth of the Toggia.

The synopsis just given above, is succeeded by a table of the yearly receptions, and one of the yearly deaths. Then come tabular views of the items included under the general superscription of—Cause. And first as to the influence of age, there being a separate compartment for each of the forms of lunacy which have been named. The general conclusions are, that insanity is most apt to be developed between the ages of 30 and 40; and taking into consideration the special forms of the malady, that mania and monomania commence between 30 and 40, lypomania between 30 and 60, and dementia between 50 and 70. Next comes a table of the months in which the inmates were admitted, comprehending also the forms of the disease. As MM. Anbarel and Thore* have shown of French lunatics, we see the effect of warm weather more plainly here, by looking to the months as divided into warm and cold. The table which follows, exhibits the same result that occurs in many of the Asylums on this side of the Atlantic, the single men largely outnumbering the married, whilst a greater number of females are married than the reverse. Artizans and agriculturists of course constitute a large proportion of the entries under the head of professions. But of 982, 56 are ecclesiastics, lawyers, physicians, and placemen; 26 are beggars and vagabonds. The hereditary influence is traced in 52 cases, mania, 25; lypomania, 3; monomania, 9; dementia, 15. Amongst the direct causes, 370 are moral causes; the chief of these are domestic troubles, 35; religious feelings, 39; love, 52; connected with property, 22, &c.; 20 are due to fright. The physical causes amount to 249. Of these, the largest in the catalogue is intemperance, 143 being so attributed. This is certainly a result which we did not anticipate in wine drinking Italy. Twenty-seven are set down as owing to excessive venery, 11 to onanism, and 25 to insolation. Then the author has a third division, including chiefly different diseases, which he entitles physico-organic. Twenty-one are included under the head of organic, and 5 under that of palsy. It is doubtful, however, we think, whether we should consider these complications as simply such, or in the light of causative influences. As characteristic of the country, we find 24 to have originated from pellagra. Under the item of meningitis, 19 are included.

After causation, we have tabular views of symptoms, in which there are sub-divisions of the primary forms, into which, as we have seen, Dr. Girolami has previously divided the manifestations of insanity. In these and other particulars, we deem the work to excel similar efforts

* *Recherches statistiques sur les causes de l'alienation mentale.* Paris, 1839. Elsewhere I have shown the principle to apply to the inmates of American Asylums, and also to cases of suicide.

of English and American writers. But in the United States, we are as devoid of a literature in relation to the present, as we are with regard to other subjects. To bring forward an example of the minutiae of the writer, under the head of lypemania, we have the following varieties: ideas in connection with constant aversion to relatives and others; sentiments of desperation, evincing religious fear, and an ever-suffering conscience, &c.

From the table of cures according to the months, (and still in connection with the form of insanity,) we deduce the conclusion that more cures had taken place in December than in any other month. But that the seasons stood in the following order—autumn, summer, spring, and winter. As a specimen of his tables, we give one of cures in relation to age; the general inference being that the greatest number of recoveries take place between the ages of 20 and 40.

	Mania.	Lypemania.	Monomania.	Dementia.	Total of cures.
Under 20 years,.....	18	1	4	3	26
From 20 to 30 years,.....	71	8	25	0	104
“ 30 to 40 “	93	7	24	1	125
“ 40 to 50 “	67	12	17	4	100
“ 50 to 60 “	49	5	16	0	70
“ 60 to 70 “	20	3	4	2	29
Above 70,	2	0	1	0	3
Age unknown,	16	6	3	2	27
	<hr/> 336	<hr/> 42	<hr/> 94	<hr/> 12	<hr/> 484

Of 200 deaths, 55 are assigned to unknown causes. Of the remainder, 8 were from surgical causes—dislocation of the cervical vertebra, fracture of the neck of the femur, &c. Amongst the diseases proving fatal, 46 were attributed to apoplexy, 18 to gangrene, 15 to phthisis pulmonalis, and 57 to marasmus, (tabe.) A second table of deaths has reference to the month in which they have occurred, arranged under the heads—mania, lypemania, monomania, dementia, dementia with epilepsy, dementia with paralysis, dementia from pellagra, imbecility and idiocy; the general result being that the seasons hold the following order in this regard—winter, autumn, summer, spring. A third table relative to mortality, takes consideration of the age of those deceased; the chief result being that the maximum of deaths occur between the decade of 40 and 60, and that between 30 and 40 has the next place.

Chapter second of the work is denominated a summary or recapitulation of the previous statistical conclusions and observations. And here in the first place he refers to a former work of his, which we have not

yet seen, but have ordered ; and which doubtless is of great value, if prepared with the diligence and talent characterizing the present brochure. This work has the following title—"Concerning the influence of civilization in augmenting mental maladies, and of the means which it possesses of reacting against this tendency. Rome, 1848." He observes in the production now under discussion, in an analogous relation: "That our present civilization consists in great part of weak and ephemeral elements, and that a material progress is not accompanied by any corresponding advance in manners and education, but on the other hand there is a weakening of religious ties." He thinks in such a state of things we may find a fertile source of physical disease, and at the same time of many nervous affections, and insanity in all its forms. The "celestial gift of reason," says he, is disturbed too by the general want of self-government, and desires unchecked by a higher feeling habitually exercised. Further on he says that there is more insanity in New York than in any nation of Europe. The greater number of males in the Hospital of St. Benedict, he doubtless attributes very properly, not to there being more insane of this sex, but to the fact that there is still a prejudice in Italy against sending persons to an asylum, which is felt in an increased degree with regard to females. And besides, they are more easily managed at home, than are men. I observe too that as in some of our asylums, the proportionate number of the married of the female sex exceeds that of the men who are married, as compared with those in a state of celibacy. This we think is owing to the difficulty of managing females with young children, when retained at home. In the additional remarks in this chapter, he refers frequently to the opinions of physicians of celebrity, shewing great familiarity with the leading French and Italian writers on the subject of insanity, and quoting from Esquirol, Parchappe, Anbarel and Thore, Desportes, Bouchet, Bertolini, Bonacossa, Greco, &c. His observations in this chapter on pellagra and indeed on other points, are interesting, but are somewhat beyond our limits.

The third chapter, with regard to treatment and hygiene, is a mere outline. In cases of mania, with a high state of exaltation, he has found immediate and constant benefit from the warm bath, combined with the cold douche to the head, laxative and diluent drinks, darkness, isolation, a diet more or less strict. Except in rare instances, in which by reason of the temperament or some other circumstance to induce the application of leeches* ; or in cases of marked congestion, when he deems it prudent even to open a vein, he never resorts to bloodletting ; following,

* Emerordale.

says he, the precepts of leading physicians, and especially those of (prelato) Professor Meli.

In lypemania, which he believes to be sympathetic, or visceral according to Pinel, he employs tonics and revulsives. Amongst which he mentions the martialia, particularly the chloride of iron, the alcoholic tincture of nux vomica, preparations of rhubarb, bitters, baths and cold ablutions. Purgatives he uses sparingly, and stimulants merely as accessory. He has tried hellebore, but without any advantage.

In dementia he administers tonics and a nourishing diet; and sometimes finds advantage from excitants, both moral and physical. He thinks also of giving a thorough trial to electricity.

In theorizing as to treatment, he observes that he differs as much on the one side from Leuret, and some of the German spiritualists, who would adopt an exclusively moral treatment, as from Falret, Morison and Broussais, who adhere to an exactly contrary opinion as to the predominance of the physical. When, he further remarks, we consider that man is a compound of the corporeal and the spiritual, a conclusion to which ancient and modern wisdom alike have arrived, is that we should act on the one or the other constituent, according to the circumstances of the case.

Means of repression, he says, make an essential part of the management of the insane. Wherever, he proceeds, the spirit of christianity exists, the ancient method of treating the lunatic has been wholly abandoned. In place of which a pleasant and friendly rule, though mingled with firmness, has been adopted generally. As means of restraint, he employs seclusion, the camisole, and the belt of Hallaran, and by this the patient is also sometimes attached to a bed or chair. The whirling chair is not used, as it is remarked, being unadvisable, according to Esquirol and other late writers. Seclusion is always temporary; and the sole mode of shewing that he disapproves of the violent conduct of a patient, is simply abstaining from the usual familiar and confiding air which he displays to the mass of the insane inmates. The diet is modified according to the case; in acute mania, it is of a lighter character, and more nourishing in melancholy and dementia. The florid health of the patients generally, and their freedom from epidemics denote the suitability of the dietary. As the insane, he observes, are very sensitive to cold, care is taken to provide warm clothing. Much use is made of baths; and by new improvements, he anticipates carrying these means to great perfection.

Chapter 4 consists of a detailed account of nine cases of insanity treated in the Hospital of St. Benedict, three of them including necroscopic

results also. In the first, a case of lypemania, in which the patient fancied that his family had lost their fortune, and were entirely ruined; cold baths, light purgatives, and subsequently tonics, were employed. The second was a case of religious melancholy, the patient being fifty-four years of age. The medical treatment consisted of colombo, the martialia, the alcoholic tincture of nux vomica, and cold baths. On post mortem examination, the meninges were in a natural condition and not adherent, nor did the cerebral substance or the ventricles present any morbid appearance. The vessels of the cerebral convolutions were turgid with venous blood, and there was a serous deposit at the base of the brain. The cerebellum presented an unnatural hardness. The intestines were healthy. The liver was of natural size; there was some venous congestion on its concave face, &c. The gall bladder was elongated, without biliary calculi, &c. The spleen was in a natural condition, the mesenteric glands larger than usual, &c. The fifth case, one of mania furibunda, resulted in recovery. The treatment comprehended the abstraction of light and other excitants, the daily use of warm baths with the cold douche on the head, and the administration of diluent and slightly purgative drinks.

We can not conclude the present article without reiterating our favorable opinion of Dr. Girolami's performance, and we trust that it is an example that will be followed by the physicians of Italy, and also, indeed, by those of countries beyond the confines of that sunny land. Moreover, if, as we believe, the establishment at Pesaro is managed with the same care that is evinced in the preparation of Dr. Girolami's brochure, it is an institution that does honor alike to its officers and to the Pontifical Sovereign, who is viewed with reverence and respect by so large a portion of the Christian world.

We now proceed to present a similar analysis of another statistical effort, to that which we have elaborated above. This is also a production relative to a "Casa De' Pazzi" in the Papal Dominions, being an institution for the insane at Perngia, (Santa Margharita) under the charge of Dr. Caesar Massari. But we have already occupied more room than the readers of a medical journal are perhaps willing to allow to an essay containing little of the original, and we shall therefore reserve further notice of the Italian writers on mental diseases, for another number of the "Journal of Insanity."

An article which we prepared for the July number of the "Journal of Insanity," was principally devoted to an analysis of a publication relative to the statistics of mental disease, as exhibited in the returns of an institution for the insane in Italy. In accordance with a remark which we then made, we now proceed to notice a second statistical work, which is due to another of these establishments in the same bright land. "Rapporto Statistico—Medico-Dodicennale, 1840-1851. Sulla Casa de'Pazzi in S. Margherita Di Perugia," &c.; or, "Report for the Twelve Years between 1839 and 1852, of the Hospital of St. Margaret, at Perugia." This is a production of Dr. Cæsar Massari, the Medical Director of the Institution.

The work under discussion consists of three parts: First, a preface relative to statistical medicine, more interesting than matters of the sort usually are; secondly, there are a number of statistical tables, but without the extended remarks of Dr. Girolami; and thirdly, we have a detailed history of fourteen cases of mental derangement, in some instances containing also the *post-mortem* results, and forming collectively a representation of the mode of treatment pursued at St. Margaret in each variety of insanity.

Dr. Massari sets out, in his preface, by declaring his allegiance to the principle of adhering to facts rather than theory, and repeats a declaration, to that effect, of "the Nestor of Italian medicine, the learned Lanza." After then alluding to the new science of statistics, he refers to an order of the Government on the subject, issued on the 13th of June, 1850, requiring a report of the statistics of every province, thus obtaining the facts required to exhibit the physical, moral, economical and civil condition of the nation; for which enlightened act, we at least are ready to assign due credit to the Papal authorities. With regard to statistics as applied to medicine, the writer goes on to say that a work* of the illustrious Dr. Antonio Salvagnoli Marchetti should not be forgotten. The statistics of insanity, he observes, originated with Pinel and Esquirol. He proceeds to allude to the many sources of error and defects in the statistics of insanity, such as the want of a proper nomenclature, confusion of symptomatology, the want of sufficiently expressive scientific terms, &c. He then speaks in tones of regret, that "Italy has not yet established a scientific aggregation of those physicians hav-

* "Istituzioni di Statistica Medica Nazionale."

ing the care of the insane, ("Medici alienisti," or, "mad doctors,") in order to discuss statistical defects, and to establish fixed formulæ relative to mental maladies." He states, furthermore, that he has called attention to this point in his first biennial report of the Hospital of St. Margaret; that it is very encouraging to him to have received, in this connection, the spontaneous approval of those high in authority; and that, with not less zeal also, Professor Gualandi, of the Hospital for the Insane at Bologna, in 1848, published a long and appropriate article, recommending an association of the physicians attached to institutions for the insane.

Our author then passes on to mention the advance in other countries in the way of a periodical literature devoted to psychological medicine. France, he observes, commenced the splendid series of the "*Annales Médico-Psychologiques*," in 1848; and Germany, in 1844, a publication of similar character; whilst England instituted an analogous effort, in 1848, in "*The Journal of Psychological Medicine and Mental Pathology*." A commencement only, he says, has been made in this line of endeavor in Italy, by Professor Panizza, and Dr. Verga, (Physician to the celebrated Sennavra at Milan,) in the "*Appendice Psichiatrica*" to the Medical Gazette of Lombardy.

In excuse for the want of particular remarks as to the tables generally, towards the end of this part of his pamphlet, Dr. Massari refers his readers to a former report, 1837-45; and concludes the section by calling attention to the increase of insanity, not only as evinced in the increasing number of receptions at Perugia, but as deduced from various facts, and shown to be general throughout Europe. This pervading increment of a sad disease he attributes chiefly to a deficiency in proper moral training, agreeing with M. Saint Marc Girardin, that we educate the intellect, but fail to act upon the heart.

From the first two statistical tables we glean the results that during the twelve years from 1840 to 1851, inclusive, 299 patients were received—males, 196; females, 103; there being at the commencement of the period as residents, 40 males, and 25 females. The number of discharges is 171—males, 114; females, 57. The number of deaths amounts to 111—males, 72; females, 39. Leaving on the 31st of December, 1852, 92 inmates—males, 50; females, 42.

The third table refers to the seasons. The receptions in spring amount to 80—males, 56; females, 24. In summer to 92—males, 57; females, 35. In autumn to 62—males, 40; females, 22. In winter to 65—males, 43; females, 22. The number of discharges in spring amounts to 35—males, 23; females, 12. In summer to 19—males,

15; females, 4. In autumn, to 59—males, 40; females, 19. In winter to 32—males, 21; females, 11. Then are enrolled the deaths, being in spring, 23—males, 16; females, 7. In summer, 22—males, 12; females, 10. In autumn, 19—males, 15; females, 4. In winter, 19—males, 12; females, 7.

The three succeeding tables we insert in full :

AGE.		Males.	Females.	Total.
Years.				
From 10 to 20,		12	15	27
“ 20 to 30,		55	24	79
“ 30 to 40,		57	29	86
“ 40 to 50,		38	22	60
“ 50 to 60,		25	8	33
“ 60 to 70,		6	3	9
“ 70 to 80,		3	2	5

SOCIAL CONDITION.		Males.	Females.	Total.
Agriculturists,		46	38	84
Artizans, &c.,		41	20	61
Merchants, &c.,		41	25	66
Soldiers,		15	0	15
Men of Science and Artists,		15	0	15
From the Aristocracy,		13	11	24
Priests,		11	0	11
Servants and Beggars,		8	1	9
From the Cloister,		6	5	11
Officials,		2	2	4

CIVIL CONDITION.		Males.	Females.	Total.
Single,		133	49	182
Married,		55	44	99
Widows,		0	9	9
Widowers,		9	0	9

Next come two similar charts, which, relating merely to locality and charges for board, may be passed over without further remark, save that of 299 admissions, 180 are classed as “poor.” Then we find tabulated the facts concerning the forms of insanity. Of the receptions, 125 were cases of mania—males, 82; females, 43. Of monomania, there were 140—males, 91; females, 49. Of dementia, there were 21 cases—males, 20; females, 11. Three of the men are classed under the head of idiocy. The next synopsis refers to the time at which the mental alienation commenced, and the consequent associated facts. Of the whole number of receptions 147 were recent cases—males, 99;

females, 48. Of inveterate cases, or those dating back beyond three years, the number received has been 98. The discharges under this head number 47—males, 32; females, 15; and the deaths 26—males, 16; females, 10. The succeeding entry has regard to the return of the psychical disturbance, the number of cases so classified being 32—males, 20; females, 12; of which 18 have been discharged—males, 12; females, 6; and 6 have died—males, 2; females, 4. A complication with epilepsy occurs in 15 cases, 4 of whom have been discharged—males, 3; female, 1; and 8 have died—males, 5; females, 3. In 7 of the inmates palsy has existed—males, 6; females, 1; all of whom have died.

The tabular views as to causation are—1st. The physical causes of their mental alienation in the male patients. 2d. The moral causative agents in the same class. 3d. The physical causes of mental disease in the female patients. And 4th, The moral causes in this section of the inmates of St. Margaret. Under the first division, the largest item are the cases set down as hereditary, being 29. Then follow 14 from intemperance and other evil courses; 13 from over-exertion and atmospheric vicissitudes; 10 are named as unknown and 5 doubtful; 4 from want; 2 from onanism; 1 from a blow on the head, &c. The leading cause in the second table is assigned to be political, in its various shapes, and amounts to 25. Then in order, 14 are attributed to domestic difficulties, 13 to reverses of fortune, 12 cases are from love, 10 from religious feelings, 2 from jealousy, 1 from vampirism; 1 is a case of simulated insanity, &c. Of the physical causes in the females, 11 are hereditary, 10 from excessive labor, insolation and atmospheric vicissitudes; 8 hysterical, 2 from fright, 2 from want, 1 from intemperance, &c. Under the fourth head, or moral causes inducing insanity in the females, domestic difficulties are at the top of the catalogue, amounting in number to 12; then comes conjugal jealousy, there being 10 cases from this cause; 9 are from religious feelings, 3 from political influences; family disasters, 2; reverse of fortune, 1; avarice, 1, &c.

Next in order follows a list of the modes of occupation pursued by the insane residents of St. Margaret. Of the men, 117 have been occupied, and 79 unoccupied. The greater number have been employed in agricultural pursuits, and next in proportion are those assisting in household matters; 19 have been engaged in some literary pursuit, a few in trades, and several in painting and the other fine arts. Of the females, 79 have been occupied and 24 not so. The separate items are as follows:—Sewing, 30; spinning, 19; as domestics, 10; preparing lint and bandages for the infirmary of the hospital, 9; weaving, 5; embroidery, 3; reading, 2; music, 1.

Immediately after the table last presented we have an important one giving the results of this institution in the cases of hereditary insanity received therein, the number being 40—males, 29; females, 11. The fate of these is as follows: discharged, 18—males, 12; females, 6. Died, 10—males, 8; females, 2. The number of those remaining in the establishment on the 31st of December, 1851, is 12—males, 9; females, 3. Then ensues a statement of the condition in which those discharged left the asylum. The number of the recoveries is 117—males, 78; females, 39. The number discharged in an improved state is 21; males, 15; females, 6. And 7—males, 6; females, 1; are entitled “chronic.” The succeeding page furnishes the statistics of recovery, as they relate to the length of time required to secure convalescence. Sixty-eight patients were discharged within six months from the date of their admission—males, 49; females, 19. Thirty-five within twelve months—males, 22; females, 13. Ten within 18 months—males, 6; females, 4. Of those remaining 36 months, 11 have been discharged—males, 7; females, 4. The number of patients leaving after a stay of three years is 4 males. After a stay of 4 years, males 5; whilst only three—males, 2; female, 1—were residents beyond eight years.

Of the 83 deaths—males, 53; females, 30—the annexed summary succinctly embraces the causation.

	Males.	Females.	Total.
Apoplexy, &c.....	15	7	22
Marasmus.....	15	7	22
Pneumonia.....	12	2	14
Acute fevers.....	5	6	11
Cachexy and dropsy,	4	5	9
Inanition.....	3	1	4
Suicide,	1	0	1

Last among the tables is an outline of all the changes at St. Margaret since its foundation:—Admissions, 693—males, 464; females, 229. Discharges, 397—males, 276; females, 121. Deaths, 204—males, 137; females, 67. Leaving at the close of 1851, 92 inmates—males, 50; females, 42.

A third division of Dr. Massari's effort consists of a detailed history of fourteen cases, treated at St. Margaret, thus illustrating alike the mode of management pursued at this establishment and the general subject of insanity: these are rather long-winded, but we shall endeavor to present a brief outline of their leading particulars. The first in the catalogue is entitled a case of “*Monomania religiosa-politica*.”—The patient was of bilious temperament, aged 32; the insanity being

apparently caused by domestic difficulties. Dr. Massari speaks of him as "enamored of the sun," and mentions that this unusual symptom existed in a patient described by Dr. Blanch, whose life was actually terminated in the eclipse of 1833. The patient at present under consideration evinced, moreover, an aversion to kings and other rulers, using abusive language in alluding to them. The method of Leuret* was employed, the cold douche being the agent, but the patient's firmness rendered it unavailing. Subsequently, frequent warm baths and refrigerant and sedative decoctions were administered. It is also remarked that especial care was had to carry into effect the rule of Georget,† never to exercise the sufferer's mind in the sense of his delusion. The individual recovered.

Case II. *Mania Omicida*.—This person killed his father in a supposed paroxysm of insanity. A prominent symptom was the fancy that he had acquired great wealth. He was of bilious temperament and strongly developed muscles. Coercive means, low diet, prolonged baths, tartar emetic in large doses, and venesection united to diminish his restlessness and violence. Later in the disease he labored under the surveillance of an attendant, whilst low diet and abstinence from wine were continued. A restoration to sanity ensued.

Case III. *Mania Tesaurica*; or, the mania in relation to property. — A poor man married the daughter of a wealthy one, but who permitted his son-in-law and his family to live an existence almost of want. This condition of things led to insanity. Of ardent disposition, with sparkling eyes and sanguine temperament, he was agitated by a continuous mania on the subject of wealth. He was in fancy the chief and richest man on earth; and, with an ungovernable loquacity, he was ever repeating words in such relation—thousands, principalities, &c. He died. We extract a few of the *post-mortem* results. Exterior.—There was some emaciation, a waxy appearance of the skin, and no disfiguration of it. The head was small and irregular, the bones of the cranium thin and deficient in diploe. There was little appearance of sutures. The meninges were engorged. There was no organic singularity in either

* We are pleased to see that full trial is made in Italy of the views of M. Leuret. They are perhaps not surpassed in originality by those of any other medical psychologist since Pinel and Esquirol. In England and America they have been by no means fairly tested.

† The three excellent rules of Georget are these—1. Ne jamais exercer l'esprit des aliénés dans le sens de leur délire. 2. Ne jamais attaquer de front, ouvertement les idées, les affections et les penchans exaltés des fous. 3. Faire naître, par des impressions diverses, des idées nouvelles, des affections, des commotions morales, reveiller ainsi des facultés inactives.—De La Folie, &c. Par M. Georget, pgs. 280, 281, 283.

the cerebrum or the cerebellum. The chest.—The left lung was hepaticized, the right engorged with blood. In the right ventricle there was a fibrous polypus—and the writer goes on to speculate how far this last might have been connected with the particular symptoms of the mental disease.

Case IV. *Monomania Religiosa*.—B. B. C., of healthy constitution, melancholy temperament and good habits, was attacked by religious insanity. He had gone into the army without consulting his father.—From being silent at first, and willing to occupy himself, he subsequently commenced to talk constantly of his sins, and to make the sign of the cross, and passed finally into a complete delirium. The treatment consisted of the camisole, isolation, ipecacuanha and emetic tartar dissolved in lemonade. After he had become tranquil, his desire continuing for a military life, he was given lessons by an old sergeant, and thus went forth a soldier from the lunatic asylum.

Case V. *Mania Erotica*.—A. F. became a patient in 1844, and died of apoplexy in 1848. She was of low stature, robust form, rough countenance, and fiery temperament, and she was also affected with goitre. Erotic insanity succeeded a disappointment in love; and, on emerging from a filthy prison, under the influence of the comfort and neatness of the hospital, in a few weeks she became tranquil and related her love-affair. Then she passed to the inertness of a stony silence, with fixed eyes, and head bent towards the earth, and with an irresistible propensity to crouch upon the naked pavement. Muttering at one time prayers and at another imprecations, she fiercely opposed every one that interrupted her. She gave way to a blind and causeless anger, using the most insulting language, and then she became torpid again. Her menstruation was regular but scanty. Bleeding and drugs alike were so difficult to carry into effect, that all hope of a cure was lost. The most peculiar result of autopsy of the brain was the presence of a tumor of the kind called by Sebert, fibro-plastic, of which a close analysis, both chemical and pathological, is given, but for the details of which we have no room.

Case VI. *Mania Puerperale Latta*.—The patient was about 36, the mother of four sons; suppression of the lacteal secretion and suppuration led to puerperal insanity. She recovered in two years. There was at first continual and violent excitement. The treatment consisted primarily in abstracting all stimuli, both physical and moral. The symptoms continuing, some repose was attained by ordinary baths, and more from cold immersion, succeeded immediately by the warm bath. As exhibiting the scientific character of the Italian physicians, we may

remark that mention is made of detecting the presence of free lactic acid in this patient, which had been evinced through a specific sourness in the perspiration; this reddened the azure of the tincture of turnsole* subsequently, in the way of treatment, vesication was employed, and antimonial frictions along the spine. Her diet was farinaceous, some fruits being also allowed, and a little bread and wine. If the food was at all augmented, the symptoms would become worse. The next additional means of treatment consisted in prescribing every six days magnesia and the flowers of sulphur; afterwards she was given copious depurative decoctions and prolonged warm baths, with, at the same time, a sprinkle of cold water on the head. Ultimately she was put to spinning, entered into the common life of the other inmates, and was allowed a more nutritive diet. Medical means were kept up, and she took generous doses of the depurative decoctions of guaiacum, of dulcamara and cinna.† The disease then terminating in alarming anemia, medicines were abandoned and moral means resorted to.

Case VII. *Mania Collerica Potenziale*.—This patient was a nun, 27 years old, of sanguine temperament, who, in consequence of some slight from the superior of the religious house to which she belonged, became violently insane, tore her garments, refused food, &c. The curative means were repression, isolation, leeching and the warm bath. Then calomel, lauro-cerasus and digitalis. She was also prescribed a vegetable diet. On recovery, after a year's residence in her family, she returned to the convent, where she subsequently enjoyed great tranquillity of mind.

Case VIII. *Mania Continua Agitata*.—The author entitles this case "agitata," as that last mentioned is entitled "collerica," because of the former being marked by agitation and the latter by violence. As a part of some preliminary remarks, he says that refusal of food is due either to some fancied command from Heaven, or to a special hallucination, or to a suicidal tendency, or else to a morbid state of the nervous, ganglionic and splanchnic system, from which proceeds an oppressed and, as it were, paralyzed condition of the gastro-enteric organs. In a note, he gives an amusing instance of the blunders which foreigners sometimes make in English and American names. For he observes that he has "perused with pleasure the short but pithy article of Dr. Luther, 'On the forced Alimentation of the Insane.' *Annali Medico-Psychol. di Parigi*, 1852. Aprile, pag. 299." Now in reality, this was an article taken originally from the "Journal of Insanity," and contributed thereto by the able and distinguished physician of the McLean Asylum, Dr.

* Litmus.

† *Artemisia santonica*.

Luther V. Bell; the editors of the "Annales Medico Psychologiques" having made a mistake in his name, and this is repeated here by Dr. Massari; he speaks of the production of Dr. Bell as "parole del Dott. Luther." But to return: the patient in the present case was a servant, aged 38, of nervous temperament. His malady was owing to too great fatigue from a varied daily avocation, together with the abuse of wine and the apprehensions attending the historical events which occurred at Rome in 1849. On his arrival at St. Margaret, he appeared quiet and tranquil, then suddenly he commenced refusing food. At night he was sleepless, but without special disturbance. His disease assumed the form of "mania agitata"—that is, rather of agitation than of fury, the most prominent symptom being the refusal of food. There was also some cardiac derangement of nervous character, and an obstinate constipation. In fifteen days there were lucid intervals. The treatment consisted of baths, purgatives, emetics, frequent clysters and vesicatories. He recovered.

Case IX. *Monomania Polio-religiosa*.—This patient was a physician, of low stature, dark complexion and eyes, and bilious temperament, with some hepatic obstruction. The historical events of Rome, in 1849, predisposed him to insanity. He forsook his profession, and (being from the country) took refuge in Perugia, which was then under Austrian protection: whilst there, for a fortnight he was in prison. The treatment, resulting in recovery, appears to have been purgatives (deobstruents) and baths. As an occupation, he was assigned the task of copying an article on mental alienation, (a translation from Signor Dalberg's Dictionary of Medicine, vol. 1, article, Mental Alienation.) On recovering, he soon regained his practice, so great was the confidence of the public in his skill.

Case X. *Acute Hystero Mania*.—Of the various cases of this character treated by the writer during late years, the present was the most grave in its symptoms. The patient was the wife of a baker, aged 30, of low stature, robust in form, of florid complexion, eyes black and sparkling, and with an animated countenance; endowed with every virtue, religious and domestic, habitually talkative and otherwise gay, of sanguine temperament, and naturally inclined to matrimonial indulgence. After the birth of a daughter she became barren, and her menstruation grew sluggish and scanty. From the fatigues of her occupation, the great heat of the oven, labor at night, and a partial abuse of wine and of conjugal pleasures, hystero-mania of high grade set in, presenting at the outset phenomena which were more or less intense and constant for the long period of ten months. On her admission she

was much excited, with countenance distorted by abnormal twitchings, with eyes sparkling and bold. Every motion betokened a violent irritation in the sexual organs, to which she would convey her hands in order to produce friction. All who approached her she met with violence and angry gestures. The straitwaistcoat was applied, and she was given a warm bath, prolonged with the cold douche to the head. An emetic was also administered. After some rest, she commenced uttering loud cries, pulling up and tearing her clothing, laughing immoderately, and exhibiting obscene actions. The baths were continued, with the addition of a suitable diet and calomel, to overcome the obstinate constipation. Menstruation not appearing, was replaced, as it were, by leucorrhœa, serving still more to excite the genitalia. Leeching was then used, (emeroidale,) and next a vesicatory to meet an apparent tendency to paralysis. And for the immobility of the right arm, opodeldoc was resorted to, through which means the torpor gradually disappeared. Other grave symptoms followed—tearing the hair, compressing the uterus with her fists, urinating in bed, chipping the wall and refusing sustenance. For three weeks subsequently she continued to show maniacal symptoms. A light bleeding was then adopted, and she went on with the baths. Later, the tincture of iron and saffron was administered in a saturated decoction of maiden-hair,* and she likewise engaged in a little work. Subsequently, on the occurrence of a heaviness in the head, and a weight in the uterine region, a full bleeding in the foot was employed. She recovered.

Case XI. Was one in which the patient, a canon, imagined himself possessed by an evil spirit; the alienation came on after a fever, and resulted in death. The treatment consisted of bland purgatives, clysters, emeto-acidulated drinks; vesicatories and simpisms were used ultimately; the camisole, baths and the douche; the autopsy of this case is also given, but we must hurry on to a close, and have therefore no room for such details.

Case XII. Merely remained for a short time in the hospital, and ultimately committed suicide, being essentially so inclined. The only circumstance of note requiring mention here is the treatment of a diarrhea, with which he was seized on the 8th day of his stay at St. Margaret—it consisted of a refrigerant diet, and the pulp of tamarinds and cassia, with an emulsion of gum arabic.

Case XIII. Was an Englishman who attempted suicide. A purgative treatment, and occupation of the mind by translating Metastasio, were the curative means employed. He recovered.

* *Adiantum pedatum.*

Case XIV, and the last, was one of *peurile dementia* in connection with epilepsy. The patient, Marietta Scarsella, of Rome, was previously a healthy child, both as to mind and body, when, at three years of age, she experienced an attack of epilepsy, after having been frightened. No great increase of morbid symptoms occurred until she was five, when her mind began to weaken, and, when eight years of age, she was admitted into the hospital of St. Margaret, on the 23d of December, 1849. After an attack of fever in March, she was placed on a depurative decoction; and in June the antimonial friction advised by Autenrieth, was applied to the head. This produced so profuse a secretion from the consequent eruption, as to require astringents for its diminution, and tonics for the debility that ensued. Counter-irritation was, however, continued, and with such apparent benefit, that, in September, 1851, she had not experienced an access of epilepsy since the previous March, whilst her mind had decidedly improved, so that she was discharged on the 18th of September. With reference to the permanence of the amelioration in the case of this unfortunate, it should be remembered that Dr. Massari's report is dated only in the following June, (1852). And, moreover, we observe that, in speaking of her amendment, he alludes to her "learning, prayers, and to cross herself"; now it may be mentioned that there is not a more common symptom of epileptic insanity than an exaltation of the religious feelings.

